

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Title 38, Code of Alabama 1975, as amended.
EFFECTIVE DATE	January 1, 1974.
ADMINISTRATION	County Department of Human Resources (State-supervised).
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Optional supplement provided to SSI recipients living in the arrangements under "Payment Levels." Blind and disabled children living in those arrangements are eligible for optional supplementation. In addition, certain grandfathered aged, blind, and disabled persons who would receive SSI except for income, receive optional supplementation.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	Spouse for spouse; parent and stepparent for child under age 18.
INCOME DISREGARDS	No disregards in addition to the Federal income disregards.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.
PLACE OF APPLICATION	County Department of Human Resources.
FUNDING	Assistance: State funds. Administration: State funds.
INTERIM ASSISTANCE	State does not participate.

PAYMENT LEVELS ¹

<u>Living arrangements</u>	<u>Combined Federal/State</u>		<u>State supplementation</u>	
	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Receiving independent home-life care (IHC) in a private home or a personal care home: ²				
Level of independence A	\$572.00	\$889.00	\$60.00	\$120.00
Level of independence B	568.00	881.00	56.00	112.00
Receiving IHC and support and maintenance in a private home or personal care home: ³				
Level of independence A	401.34	632.67	60.00	120.00
Level of independence B	397.34	624.67	56.00	112.00
Receiving specialized IHC in a private home or personal care home ³	572.00	889.00	60.00	120.00
Receiving specialized IHC and support and maintenance in a private home or personal care home ³	401.34	632.67	60.00	120.00
Living in foster home with IHC or specialized IHC ^{2 3}	622.00	989.00	110.00	220.00
Living in cerebral palsy treatment center:				
Disabled	708.00	1,161.00	196.00	392.00

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

² A licensed physician must recommend IHC or specialized IHC and someone must actually provide and receive payment for the care. The care provider cannot be an immediate relative and must be employed by a certified Home Health agency.

³ Foster homes must be licensed or approved by the Department of Human Resources.

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

ELIGIBILITY:

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	No programs for the aged, blind, and disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration does not obtain this information.

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Chapter 409.212, Florida Statutes.
EFFECTIVE DATE	January 1, 1974.
ADMINISTRATION	Department of Children and Families.
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Under the community care programs, an optional State supplement is provided to aged, blind, or disabled persons who either receive SSI payments or meet all SSI criteria except for income, and their income does not exceed \$697. Blind and disabled children are not eligible for the supplement unless they reside in a nursing home (personal needs supplement).
RECOVERIES, LIENS, AND ASSIGNMENTS	Amount of public assistance received after August 31, 1967 creates a debt against the estate of the aged, blind, or disabled recipient and the State can file a claim after death. Homestead exempt during life of spouse and/or dependent children if occupied as a homestead. Claims are filed against the estate of individuals who received Medicaid on or after their 55 th birthday.
RELATIVE RESPONSIBILITY	None.
INCOME DISREGARDS	Community care program: Personal needs allowance of \$43 per month and earned income disregards.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.
PLACE OF APPLICATION	Community care program: Local offices of State Department of Children and Families.
FUNDING	Assistance: State funds. Administration: State funds.

INTERIM ASSISTANCE

State participates.

PAYMENT LEVELS ¹

<u>Living arrangements</u>	<u>Combined Federal/State</u>		<u>State supplementation</u>	
	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Community care program: ^{2 3} Adult family care homes ⁴	\$740.00	---	\$228.00	---
Assisted living facilities	740.00	---	228.00	---
Medicaid facility	35.00	\$70.00	5.00	\$10.00

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

ELIGIBILITY:

CRITERION

SSI program guidelines (title XVI).

DETERMINED BY

Social Security Administration.

MEDICALLY NEEDY PROGRAM

Program for the aged, blind, and disabled medically needy.

UNPAID MEDICAL EXPENSES

The Social Security Administration does not obtain this information.

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

² Payment includes up to \$43 for personal needs allowance.

³ Recipients who lose SSI eligibility because of Social Security (title II) benefits increases may continue to be eligible if they qualify for these living arrangements.

⁴ SSA and State agencies consider couples residing in these living arrangements as individuals the month after leaving an independent living arrangement.

OPTIONAL STATE SUPPLEMENTATION¹

State does not provide optional supplementation.

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID**ELIGIBILITY:**

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	Program for the aged, blind, and disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration does not obtain this information.

¹ Mandatory minimum supplementation is administered by the Social Security Administration. For mandatory supplementation, compliance is by the method of maintaining all payment levels. State participates in the Interim Assistance Reimbursement program.

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Budget approval by State legislature.
EFFECTIVE DATE	January 1, 1974.
ADMINISTRATION	Cabinet for Families and Children, Department for Community Based Services.
PASSALONG	In compliance by the method maintaining all payment levels.
SCOPE OF COVERAGE	Optional State supplement provided to every aged, blind, and disabled person who has a need for care in a personal care facility (not title XIX) or in a family care home licensed under the health licensure act or for the services of a caretaker in the home and who has insufficient income to obtain this care. Blind and disabled children are eligible for optional supplementation for caretaker services in the home. The minimum age requirement for a personal care home is 16, and 18 for a family care home.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	Caretaker services- spouse for spouse and parent for child under age 18 if living together, and relative responsibility for the month of admission in personal care home or family care home.
INCOME DISREGARDS	For earned income, the first \$65 plus one-half of remainder; for unearned income, no disregards.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.

PLACE OF APPLICATION Local offices of State Cabinet for Families and Children, Department for Community Based Services.

FUNDING Assistance: State funds.
Administration: State funds.

INTERIM ASSISTANCE State participates.

PAYMENT LEVELS ¹

<u>Living arrangements</u>	<u>Combined Federal/State</u>		<u>State supplementation</u>	
	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Personal-Care facility ^{2 3}	\$906.00	---	\$394.00	---
Family Care Home ³	651.00	---	139.00	---
Caretaker in home	545.00	\$841.00	33.00	\$72.00

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

ELIGIBILITY:

CRITERION SSI program guidelines (title XVI).

DETERMINED BY Social Security Administration.

MEDICALLY NEEDY PROGRAM Program for the aged, blind, and disabled medically needy.

UNPAID MEDICAL EXPENSES The Social Security Administration obtains this information.

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

² Represents the maximum paid. Lesser amounts may be paid depending on need.

³ Federal and State agency consider couples residing in these living arrangements as individuals one month after leaving an independent living arrangement.

OPTIONAL STATE SUPPLEMENTATION¹

State does not provide optional supplementation.

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID**ELIGIBILITY:**

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	No program for the aged, blind, and disabled medically needy unless they are below 135% the poverty level.
UNPAID MEDICAL EXPENSES	The Social Security Administration does not obtain this information.

¹ Mandatory minimum supplementation is administered by the Social Security Administration. For mandatory supplementation, compliance is by method of maintaining all payment levels. State does not participate in the Interim Assistance Reimbursement program.

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	North Carolina General statute 108A.40 through 108A.47 and Chapter 111.
EFFECTIVE DATE	January 1, 1974.
ADMINISTRATION ¹	Department of Health and Human Services, Division of Social Services ² and Division of Services for the Blind (State-supervised and county-administered).
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Optional State supplementation provided to aged, blind, and disabled persons living in adult care homes. Blind and disabled adults not eligible for SSI may also be supplemented in a private living arrangement. Blind children are eligible for optional supplementation. Disabled children and adults in State institutions for developmental disabilities or mental disease are not eligible for optional supplementation.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	No income is deemed to the spouse at home.
INCOME DISREGARDS	<u>All categories:</u> A \$20 exemption applies to any income including SSI, with the exception of those persons whose income is a Veterans Administration (VA) pension payment or a VA compensation payment to the surviving parent of a veteran. <u>Aged and disabled:</u> For earned income, disregard the first \$65, subtract impairment related work expenses (e.g., equipment) and other work related expenses (e.g., uniforms), and disregard one-half of the remainder. <u>Blind:</u> For earned income, disregard the first \$85 plus one-half of the remainder.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply, except that the value of all household goods and personal effects is excluded.

¹ Mandatory minimum supplementation is administered by the same agency as optional supplementation.

² Program providing assistance to aged and disabled persons known as State/County Special Assistance for Adults.

PLACE OF APPLICATION

County offices of the Department of Social Services.

FUNDING

Assistance: 50 percent State funds; 50 percent county funds.
Administration: 100 percent County funds.

INTERIM ASSISTANCE

State participates (in electing counties).

PAYMENT LEVELS ¹

<u>Living arrangements</u>	<u>Combined Federal/State</u>		<u>State supplementation</u>	
	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
Adult care home ²				
Basic ³				
(Aged, blind & disabled)	\$982.00	---	\$470.00	---
Disenfranchised ^{5 4 5}				
(Aged & disabled)	1,231.00	---	719.00	---
Blind ineligible for SSI: ⁶				
Not paying shelter and utilities	NA	NA	97.00	⁷ 194.00
Paying shelter and utilities	NA	NA	146.00	⁸ 243.00

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

² A \$20 income exemption is allowed. In addition, a \$36 personal needs allowance is included in the optional supplementation.

³ Couples residing in these living arrangements are treated as individuals one month after entering an independent living arrangement.

⁴ Disenfranchised recipients are those who were grandfathered for continued coverage when the basic rate was reduced in August 1995.

The special assistance rate for disenfranchised recipients is now the same for ambulatory and semi-ambulatory, effective July 1, 1999.

⁶ This is a temporary supplement paid until SSI eligibility is determined. This is for people who are currently in a private living arrangement.

⁷ If only one member of the couple is blind, payment level is \$146.

⁸ If only one member of the couple is blind, payment level is \$219.

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

ELIGIBILITY:

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	Program for the aged, blind, and disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration does not obtain this information.

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Part 1-B Proviso applicable to the Department of Health and Human Services as included in the state appropriation act each year.
EFFECTIVE DATE	July 1, 2000.
ADMINISTRATION	Department of Health and Human Services.
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Optional State supplement provided to SSI recipients and other low income individuals who meet the State's net income limitation and live in licensed community/residential-care facilities. Blind and disabled children are not eligible for optional supplementation.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	None.
INCOME DISREGARDS	No disregards in addition to the Federal income disregards.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.
PLACE OF APPLICATION	County offices of Department of Social Services.
FUNDING	Assistance: State funds. Administration: State funds.
INTERIM ASSISTANCE	State does not participate.

PAYMENT LEVELS ¹

<u>Code</u>	<u>Living arrangements</u>	<u>Combined Federal/State</u>		<u>State supplementation</u>	
		<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
	Licensed Residential-Care facility ^{2 3}	\$860.00	----	\$348.00	----

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID

ELIGIBILITY:

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	No program for the aged, blind, or disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration does not obtain this information.

¹ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

² Represents maximum amount paid; lesser amounts may be paid based on need. Includes a \$39 personal needs allowance.

³ Couples, if any, residing in these facilities are considered 2 individuals.

OPTIONAL STATE SUPPLEMENTATION¹

State does not provide optional supplementation.

STATE ASSISTANCE FOR SPECIAL NEEDS

State does not provide assistance for special needs.

MEDICAID**ELIGIBILITY:**

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	Program for the aged, blind, and disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration obtains this information.

¹ Mandatory minimum supplementation is administered by the Social Security Administration. For mandatory minimum supplementation, compliance is by the method of maintaining all payment levels. State participates in the Interim Assistance Reimbursement program.